



**City of Cambridge
Department of Public Works
147 Hampshire Street
Cambridge MA 02139**

TEMPORARY CONSTRUCTION ACCESS PERMIT APPLICATION

Today's Date _____ Permit # _____
Firm Address _____
City _____
State _____
Zip Code _____
Contractor or Owner _____
Contact Owner _____
Contact Person _____
Emergency Telephone # _____ *Area Code Required
Day Time Telephone # _____ *Area Code Required
Project Site _____
Nearest Intersection _____

**PERMIT FEE/RENEW FEE - \$100.00 PER MONTH
OBSTRUCTION: (Requires \$2,000 City of Cambridge Bond) ATTACH COPY OF
TRAFFIC MANAGEMENT PLAN & SITE PLAN SHOWING
SIZE, DIMENSIONS AND LOCATION OF
PROPOSED TEMPORARY CONSTRUCTION ACCESS**

Address of proposed access:

Frontage:

Block:

Lot:

Distance from proposed access to surrounding property lines & curb cuts:

Dimensions of proposed access:

Location of any parking meters, trees, sign posts, fire hydrants, utility poles, etc. in direct vicinity of proposed access:

Expected duration of construction access: From _____ To _____

Why temporary access is required:

*******DO NOT WRITE BELOW - FOR DPW USE ONLY*******

Approved By _____ Date of Approval _____

Expiration Date _____ Renewal Expiration Date(s) _____

Signature _____ Title _____